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Fill in this information to identify your case and this filing:							
Debtor 1	Eric Brooks	W.U. N.	Lank				
Debtor 2 (Spouse, if filing)	First Name	Middle Name Middle Name	Last Name Last Name				
United States Bankruptcy Court for the: Eastern District of Pennsylvania							
Case number	24-10100		<u>. </u>				

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

i di c ii	Describe Each Residence, Bu	iuiiig	, Land, or Other Real Estate Fou Own or Hat	e an interest in		
1. Do y o	ou own or have any legal or equitable	intere	est in any residence, building, land, or similar prop	erty?		
	o. Go to Part 2.		, <u>,</u> , , , , , , , , , , , , , , , , ,	•		
_	es. Where is the property?					
	ou. Whore is the property.		What is the property? Check all that apply.	Do not deduct secured cla	ima ar avamentions. Dut	
	FOOA NA MAONITOOMEDY AND	_	☑ Single-family home	the amount of any secured	claims on Schedule D:	
1.1.	. 5364 W. MONTGOMERY AVE Street address, if available, or other description		Duplex or multi-unit building	Creditors Who Have Claim	s Secured by Property.	
	Street address, if available, of other descrip	illori	☐ Condominium or cooperative	Current value of the	Current value of the	
			Manufactured or mobile home	entire property?	portion you own?	
			- 🔲 Land	\$109,600.00	\$109,600.00	
	Philadelphia PA 19	131	Investment property	December the metume of	£	
	City State ZIP Code	- Timeshare	Describe the nature o interest (such as fee s			
			□ Other	the entireties, or a life		
			Who has an interest in the property? Check one.	Fee Simple		
	Philadelphia		☑ Debtor 1 only			
	County		Debtor 2 only	□ 		
			Debtor 1 and Debtor 2 only	Check if this is community property (see instructions)		
			At least one of the debtors and another	,		
			Other information you wish to add about this it property identification number:	em, such as local		
16			property identification number.			
ii you	own or have more than one, list here:		What is the property? Check all that apply.			
			Single-family home	Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule		
1.2.			Duplex or multi-unit building	Creditors Who Have Claim		
	Street address, if available, or other descrip	tion	☐ Condominium or cooperative	Current value of the	Current value of the	
			☐ Manufactured or mobile home	entire property?	portion you own?	
			☐ Land	\$	\$	
			☐ Investment property			
	City State ZI	State ZIP Code	☐ Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by		
	city citate _	0040	☐ Other	the entireties, or a life		
			Who has an interest in the property? Check one.			
			Debtor 1 only			
	County		Debtor 2 only			
	•		Debtor 1 and Debtor 2 only	☐ Check if this is con	nmunity property	
			At least one of the debtors and another	(see instructions)		
			Other information you wish to add about this ite	m, such as local		
			property identification number:	· 		

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Document Page 2 of 33e number (if known) 24-10100 Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the ☐ Condominium or cooperative entire property? portion you own? Manufactured or mobile home ☐ Land Investment property Describe the nature of your ownership City ZIP Code ■ Timeshare State interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 109,600.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles **☑** No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.1 Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another

☐ Check if this is community property (see

instructions)

Other information:

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	3.3.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
		Model:		Debtor 1 only	Creditors Who Have Clain	
		Year:		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
		Other information:		The locast one of the deptors and another		
				☐ Check if this is community property (see	\$	\$
				instructions)		
				Who has an interest in the property? Check one.		
	3.4.	Make:		_	Do not deduct secured cla the amount of any secure	
		Model:		☐ Debtor 1 only ☐ Debtor 2 only	Creditors Who Have Clain	ns Secured by Property.
		Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
		Other information:				
				☐ Check if this is community property (see	\$	\$
				instructions)		
1	Wato	oraft aircraft motor h	nomes ATVs and other	er recreational vehicles, other vehicles, and acces	eorioe	
т.				ft, fishing vessels, snowmobiles, motorcycle accesso		
	Z No		noro, personar waterora	nt, norming vessels, snowmeshes, meteroyele decesse	1100	
	☐ Ye					
		,,,				
	4.1.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
		Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clain	
		Year:		Debtor 2 only	ordatore vine riave class	to decared by 1 reporty.
				Debtor 1 and Debtor 2 only	Current value of the	Current value of the
		Other information:		At least one of the debtors and another	entire property?	portion you own?
				☐ Check if this is community property (see		
				instructions)	\$	\$
				,		
	If you	own or have more than	one, list here:			
	4.2.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	
		Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clain	
		Year:		Debtor 2 only	Current value of the	Current value of the
		Other information:		Debtor 1 and Debtor 2 only	entire property?	portion you own?
		Other information.		At least one of the debtors and another		
				☐ Check if this is community property (see	\$	\$
				instructions)		
				,		
					_	
5.			-	ll of your entries from Part 2, including any entries		\$0.00
	you n	ave attached for Part	2. WHILE HIAL HUIHDER N	lere	······	

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Part 3:

Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

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Current value of the portion you own?

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		Do not deduct secured claims or exemptions.
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
	□ No □ Yes. Describe Household goods and furnishings	\$1,500.00
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	J
	Yes. Describe Cell phone	\$\$
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ✓ No ✓ Yes. Describe	\$
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	
	and kayaks; carpentry tools; musical instruments	
	Yes. Describe	\$
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment ✓ No ✓ Yes. Describe	\$
11	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	_
	✓ Yes. Describe Clothing	\$800.00
12	. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ✓ No ✓ Yes. Describe	\$
13	Non-farm animals Examples: Dogs, cats, birds, horses	
	✓ No ✓ Yes. Describe	\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No Yes. Give specific information	\$
15	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$

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			 -	٠٠, ٠	_	•	-carriage (" KIIOWII)_	
Name	Middle Name	Last Name		•					

Part 4:	Describe You	r Financial Assets			
Do you o	wn or have any l	egal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Exam</i>	<i>ples:</i> Money you h	ave in your wallet, in your hom	ne, in a safe deposit box, and on hand when you fi	le your petition	
☑ No)				
☐ Ye	es			Cash:	\$
Exam	and other sin	avings, or other financial accou nilar institutions. If you have m	nts; certificates of deposit; shares in credit unions ultiple accounts with the same institution, list each	, brokerage houses,	
☑ No	os		Institution name:		
		17.1. Checking account:			\$
		17.2. Checking account:			\$
		17.3. Savings account:			\$
		17.4. Savings account:			\$
		17.5. Certificates of deposit:			\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
	oles: Bond funds, i	or publicly traded stocks nvestment accounts with broke	erage firms, money market accounts		
☐ Ye	es	Institution or issuer name:			
					\$
					\$
					\$
-	oublicly traded sto C, partnership, a	-	rated and unincorporated businesses, includir	ng an interest in	
☑ No		Name of entity:		% of ownership:	
	es. Give specific formation about			0%%	\$
	em			0% %	\$
				%	\$

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		ther negotiable and non-negotiable instruments	
Negotiable instruments Non-negotiable instrum	include personal ch ents are those you o	ecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific	Issuer name:		
information about them			\$
			\$
			\$
. Retirement or pension	accounts		
Examples: Interests in I	RA, ERISA, Keogh,	401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No			
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar pla	n:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account	<u> </u>	\$
	Keogh:		\$
	Additional account:		\$
	Additional account:	- <u></u>	\$
		made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications	
☑ No			
☐ Yes		Institution name or individual:	
☐ Yes	Electric:	Institution name or individual:	\$
□ Yes		Institution name or individual:	Ψ
□ Yes	Electric: Gas:	Institution name or individual:	\$
□ Yes	Electric: Gas: Heating oil:		\$ \$
□ Yes	Electric: Gas: Heating oil: Security deposit on	Institution name or individual:	\$ \$
□ Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent:		\$\$
□ Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone:		\$\$ \$\$ \$\$
□ Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water:		\$\$ \$\$ \$\$
□ Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture:		\$\$ \$\$ \$\$
☐ Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water:		\$\$ \$\$ \$\$ \$\$
	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	rental unit:	\$\$ \$\$ \$\$ \$\$
s. Annuities (A contract fo	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:		\$\$ \$\$ \$\$ \$\$
s. Annuities (A contract fo	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	rental unit:	\$\$ \$\$ \$\$ \$\$
s. Annuities (A contract fo	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	rental unit:	\$\$ \$\$ \$\$ \$\$ \$\$
a. Annuities (A contract fo	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	rental unit:	\$\$ \$\$ \$\$ \$\$

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26 U.S.C. §§ 530(b)(1), 529A(b), a 2 No	and 529(b)(1).		under a qualified state tuition program.	
The Yes Ins	stitution name and des	scription. Separately file the	e records of any interests.11 U.S.C. § 521(c)):
				\$
				\$
				Ψ
				Ψ
25. Trusts, equitable or future intere exercisable for your benefit	ests in property (othe	er than anything listed in	line 1), and rights or powers	
☑ No				
☐ Yes. Give specific]
information about them				\$
26. Patents, copyrights, trademarks Examples: Internet domain names ✓ No ☐ Yes. Give specific information about them			-	\$
27. Licenses, franchises, and other Examples: Building permits, excluNo	-	itive association holdings, l	iquor licenses, professional licenses	
☐ Yes. Give specific]
information about them				\$
Money or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				
No				
Yes. Give specific information				•
about them, including wh	ether			\$
you already filed the return and the tax years			State:	\$
and and tax , care, minim			Local:	\$
☑ No		oort, child support, mainten	ance, divorce settlement, property settlemer	nt
Yes. Give specific information.			Alimony:	\$
			Maintenance:	\$
			Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
			1 Topolty Solution of the	•
Social Security benefit	y insurance payments		ay, vacation pay, workers' compensation,	
No				1
☐ Yes. Give specific information.				\$

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31.	Interests in insurance policies Examples: Health, disability, or life insurance ✓ No	ce; health savings account (HS	A); credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
	, ,			\$
				\$
				\$
32.	Any interest in property that is due you if you are the beneficiary of a living trust, exproperty because someone has died. No Yes. Give specific information		rance policy, or are currently entitled to receive	
				<u> </u>
33.	Claims against third parties, whether or Examples: Accidents, employment disputes ✓ No	=		
	☐ Yes. Describe each claim			\$
34.	Other contingent and unliquidated claim to set off claims No	s of every nature, including	counterclaims of the debtor and rights	υ
	☐ Yes. Describe each claim			\$
35.	Any financial assets you did not already ☑ No ☐ Yes. Give specific information	list		\$
36.	Add the dollar value of all of your entries for Part 4. Write that number here		entries for pages you have attached	\$0.00
Pa	rt 5: Describe Any Business-F	Related Property You (Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitab	le interest in any business-re	elated property?	
	No. Go to Part 6.			
	☐ Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions yo	u already earned		
	No			\neg
	Yes. Describe			\$
39.	Office equipment, furnishings, and supp Examples: Business-related computers, software.		achines, rugs, telephones, desks, chairs, electronic device	es
	Yes. Describe			\$

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Eric Brooks Debtor 1

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No ☐ Yes. Describe..... 41. Inventory ☐ No ☐ Yes. Describe..... 42. Interests in partnerships or joint ventures ☐ No ☐ Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

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Doc 13 Filed 02/13/24 Entered 02/13/24 22:27:45 Desc Main Eric Brooks Document Page 10 of an number (if known) 24-10100 Debtor 1 48. Crops—either growing or harvested ■ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ■ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ■ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **2** No ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here

Part 8: List the Totals of Each Part of this Form					
55. Part 1: Total real estate, line 2			→	\$	109,600.00
56. Part 2: Total vehicles, line 5	\$	0.00			
57. Part 3: Total personal and household items, line 15	\$	2,600.00			
58. Part 4: Total financial assets, line 36	\$	0.00			
59. Part 5: Total business-related property, line 45	\$	0.00			
60. Part 6: Total farm- and fishing-related property, line 52	\$	0.00			
61. Part 7: Total other property not listed, line 54	+\$	0.00			
62. Total personal property . Add lines 56 through 61	\$	2,600.00	Copy personal property total 🛨	+ \$	2,600.00
63. Total of all property on Schedule A/B. Add line 55 + line 62				\$	112,200.00

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Fill in this information to identify your case:				
Debtor 1	Eric Brooks	NE LU. N.		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)		Middle Name	Last Name	
United States	• •	r the: Eastern District of Pe	nnsylvania	
Case number	24-10100			
(If known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Part 1: Identify the Property You Claim as Exempt								
	 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 								
		on of the property and line on that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Line from Schedule A/B:	Principal residence 2.1	\$ <u>109,600.00</u>	2 \$ 27,900.00 □ 100% of fair market value, up to any applicable statutory limit	522(d)(1)				
	Brief description: Line from Schedule A/B:	Household goods 6	\$ <u>1,500.00</u>	✓ \$ 1,500.00 100% of fair market value, up to any applicable statutory limit	522(d)(3)				
	Brief description: Line from Schedule A/B:	Electronics 7	\$300.00	■ \$\frac{300.00}{100% of fair market value, up to any applicable statutory limit	522(d)(3)				
3. Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) ✓ No ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ No ☐ Yes									

Debtor 1

Part 2:

Additional Page

Middle Name

Last Name

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Clothing	\$800.00	∡ \$ 800.00	522(d)(3)
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your case:						
Debtor 1	Eric Brooks					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Pennsylvania						
Case number	24-10100					
(If known)						

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secured Claims				
for each claim. If more than one creditor h As much as possible, list the claims in alph	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Select Portfolio Serv	Describe the property that secures the claim:	\$36,103.59	\$109,600.00	\$
Creditor's Name P.O. Box 65250 Number Street	5364 W. Montgomery Ave. Philadelphia, PA			
Salt Lake City UT 84165 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	 ✓ An agreement you made (such as mortgage or secured car loan) ✓ Statutory lien (such as tax lien, mechanic's lien) ✓ Judgment lien from a lawsuit ✓ Other (including a right to offset) 	-		
Date debt was incurred	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		1		
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	_		
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Date debt was incurred	□ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset)	-		
	Column A on this page. Write that number here:	\$36,103.59		
Add the donar value of your entities in	Column A on this page. Write that number here.	00,100.00		

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Case number (if known) 24-10100 Eric Brooks Debtor 1 Last Name

First Name

Middle Name

Additional Page Part 1: After listing any entries on this p by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$ 5	6
Creditor's Name		· <u></u>	·	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt	, , ,			
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	S
Creditor's Name				
Number Street				
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	§
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	s in Column A on this page. Write that number here:	s 36,103.59		
	add the dollar value totals from all pages.	Ψ		
Write that number here:	and the dollar value totals itolli all pages.	\$ 36,103.59		

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Debtor 1 Eric Brooks

Part 2:

First Name Middle Name

Last Name

List Others to Be Notified for a Debt That You Already Listed

Case number (if known) 24-10100

ag yo	ency is tryir u have more	ng to collect from you for a	debt you owe to sof the debts that	someone else, list the you listed in Part 1, lis	debt that you already listed in Part 1. For example, if a collection creditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	

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Fill in this information to identify your case:				of 3		
Debtor 1	Eric Brooks	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Pennsylvania						
Case number	24-10100					
(II KIIOWII)						

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pai	t 1: List All of Your PRIORITY Unsecure	ed Claims			
1.	Do any creditors have priority unsecured claims	s against you?			
	☑ No. Go to Part 2.				
	Yes.				
	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the c	editor has more than one priority unsecured claim, list that a claim has both priority and nonpriority amounts, list that claims in alphabetical order according to the creditor's national Part 1. If more than one creditor holds a particular claim instructions for this form in the instruction booklet.)	at claim here ar ame. If you hav	nd show both e more than t	priority and wo priority
	,	,	Total claim	Priority	Nonpriority
				amount	amount
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	when was the debt incurred?			
		As of the date you file, the claim is: Check all that apply			
	City State ZIP Code	Contingent			
	Who incurred the debt? Check one.	Unliquidated			
	Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt				
	•	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	Yes				
2.2	— 133				
2.2	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
		When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
1	☐ Check if this claim is for a community debt	intoxicated			
	Is the claim subject to offset?	Other. Specify			
	☐ No				
	Yes				

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Your PRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them	Total claim	Priority amount	Nonpriority amount	
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	☐ Other. Specify			
	No				
	Yes				
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	☐ Unliquidated ☐ Disputed			
	Who incurred the debt? Check one.	■ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	☐ Claims for death or personal injury while you were			
	lacksquare Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	☐ No ☐ Yes				
			\$	¢	\$
	Priority Creditor's Name	Last 4 digits of account number	Ψ	_ Ψ	Ψ
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	-	Other. Specify			
	Is the claim subject to offset? □ No				
	☐ Yes				
	_ 100				

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Part 2: List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority uns	secured cl	aims against yo	u?		
	☐ No. You have nothing to report in this					
	Yes	o part. Oak		io obait with your other somedies.		
	163					
4	l ist all of your nonpriority unsecured	claims in	the alphabetical	order of the creditor who holds each claim. If a creditor has	more	than one
- '	nonpriority unsecured claim list the cred	itor separa	itely for each clair	m. For each claim listed, identify what type of claim it is. Do not	list cla	ims already
	included in Part 1. If more than one cred	itor bolds a	narticular claim	list the other creditors in Part 3.If you have more than three no	nnrinri	ty unsecured
	claims fill out the Continuation Page of P		partioular olaim,	not the other dreaters in rate on you have more than three no	приот	ty anocource
	olamo ili out the continuation rage of r	uit Z.				
					Tota	al claim
	l					
4.1	PECO c/o Southwest Credit Sy	/stems		Last 4 digits of account number		4,495.00
	Nonpriority Creditor's Name				\$	4,493.00
	4120 INTERNATIONAL PKWY	SUITE	1100	When was the debt incurred?		
	Number Street		1100	_		
	Carrollton	TV	75007			
		TX		As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	As of the date you me, the claim is. Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated		
				Disputed		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	_					
	Check if this claim is for a commun	ity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	le the claim cubicat to offeet?					
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	☑ No			Other. Specify Utility		
	☐ Yes					
						444.00
4.2	Verizon Wireless			Last 4 digits of account number	\$	111.00
	Nonpriority Creditor's Name			When was the debt incurred?		
	• •					
	POB 26055 Number Street			_		
		N 4N I	55040	As of the date you file, the claim is: Check all that apply.		
	Minneapolis	MN	55046	- As of the date you me, the claim is. Oneok an that apply.		
	City	State	ZIP Code	☐ Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated		
				☐ Disputed		
	Debtor 1 only			Disputed		
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
				Obligations arising out of a separation agreement or divorce		
	Check if this claim is for a commun	ity debt		that you did not report as priority claims		
	la tha alaim amhiait ta affaith			Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other. Specify Utility		
	☑ No			Other. Specify Others		
	☐ Yes					
4.3						
7.0	Aqua c/o National Recovery			Last 4 digits of account number	•	876.00
	Nonpriority Creditor's Name			When was the debt incurred?	Φ	
	491 PAXTON STREET HARRI	ISBURG	, PA			
	Number Street		·	=		
	Harrisburg	PA	17111			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	•			☐ Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	☑ Debtor 1 only					
	Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a community debt					
			Obligations arising out of a separation agreement or divorce			
	Is the claim subject to offset?		that you did not report as priority claims			
	✓ No		Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes			Other. Specify <u>Utility</u>		
	35					

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, nu	ımber the	em beginning with	4.4, followed by 4.5, and so forth.	То	tal claim
4.4	Credit One Bank c/o Midland	Credit M	lgmt	Last 4 digits of account number	\$	850.00
	350 CAMINO DEL LA REINA	, SUITE	, 100	When was the debt incurred?		
	Number Street San Diego CA 92108		92108	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only Debtor 2 only			Type of NONDRIGDITY upsecured claim:		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans		
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No			Other. Specify Credit card		
	Yes					
4.5	Capital One c/o Portfolio Reco	overv		Last 4 digits of account number	\$	704.00
	Nonpriority Creditor's Name	-		When was the debt incurred?		
	120 CORPORATE BLVD, STI	E 100				
	Norfolk City	VA State	23502 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	•	State	ZIP Code	☐ Contingent☐ Unliquidated		
	Who incurred the debt? Check one. ✓ Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Student loans		
	_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No ☐ Yes			Other. Specify Credit card		
4.6					\$	555.00
	Tempoe c/o Vance and Huffm	an		Last 4 digits of account number		
	55 MONETTE PKWY STE 10	0		When was the debt incurred?		
	Number Street Smithfield	VA	23430	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed		
	Debtor 1 only					
	□ Debtor 2 only□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
			t one of the debtors and another Obligations arising out of a separation agreement or divorce that			
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No			Other. Specify Extension of credit		
	Yes					

Debtor 1

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Part 3: List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				_
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Clair
				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Cheek analy Dept 1) Creditors with Priority I Incorporate Claims
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
				Last 4 digits of account number
City		State	ZIP Code	
Nama				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			□ Part 2: Creditors with Nonpriority Unsecured
				Claims
O::			710.0	Last 4 digits of account number
City		State	ZIP Code	On which autorin Book 4 on Book 9 did you liet the enininal anadition?
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Ciains
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
N	Otros			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Priority Unsecured
				Claims Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number

6j. Total. Add lines 6f through 6i.

7,945.00

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	Sig. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$7,945.00
			Г

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In re	Eric Brooks	Case No.	24-10100
	Debtor		(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F

☐ Check this box it debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Credit card				
PNC Bank PO BOX 5580 Cleveland, OH 44101							190.00
ACCOUNT NO.			Utility				
PGW c/o Bay Area Credit 4145 SHACKLEFORD RD, Ste. 330B Norcross, GA 30093							164.00
ACCOUNT NO.							
ACCOUNT NO.							
					Sub	total➤	s 354.00
continuation sheets attached							

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3 or (Official Form 6F) (12/07) - Cont.		Document	Pag	ge 23 of 33	

In re	Eric Brooks	,	Case No. 24-10100	
	Debto	r	(if known)	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Account.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet noofcontinuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal ➤							\$
Total➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)						\$	

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Fill in this information to identify your case:					
Debtor	Eric Brooks				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse If filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court f	or the: Eastern District of Pe	nnsylvania		
Case number	24-10100				
(If known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - See Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	· company with	whom you h	nave the contract or lease	State what the contract or lease is for
2.1					
Г	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	—
2.3					
	Name				_
	Number	Street			
L	City		State	ZIP Code	—
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Debtor 1 Eric Brooks

First Name Middle Name

ne Last Name

Case number (if known) 24-10100

	Ad	ditional P	age if You Ha	ve More Contracts or Le	ases
	Person or	company w	rith whom you l	nave the contract or lease	What the contract or lease is for
2. <u>2</u>					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this information to identify your case:							
Debtor 1	Eric Brooks First Name Middle Name Last Name						
Debtor 2 (Spouse, if filing)	First Name	Midd l e Name	Last Name				
United States Bankruptcy Court for the: Eastern District of Pennsylvania							
Case number (If known)	24-10100						

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a join No	t case, do not list either spouse	as a codebtor.)					
	☐ Yes							
2.	2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)							
	☑ No. Go to line 3.							
	☐ Yes. Did your spouse, former spouse, or legal eq	uivalent live with you at the time	?					
	☐ No							
	Yes. In which community state or territory did	you live?	Fill in the name and current address of that person.					
	Name of your spouse, former spouse, or legal equivalent		_					
	Number Street		_					
			_					
	City State	ZIP Code						
3.	In Column 1, list all of your codebtors. Do not include shown in line 2 again as a codebtor only if that poschedule D (Official Form 106D), Schedule E/F (Oschedule E/F, or Schedule G to fill out Column 2.	erson is a guarantor or cosign official Form 106E/F), or Sc <i>h</i> ed	er. Make sure you have listed the creditor on					
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt					
			Check all schedules that apply:					
3.1								
	Name		Schedule D, line					
			☐ Schedule E/F, line					
	Number Street		☐ Schedule G, line					
	City State	ZIP Code						
3.2	•	2340						
	Name		Schedule D, line					
			☐ Schedule E/F, line					
	Number Street		☐ Schedule G, line					
	City State	ZIP Code	<u></u>					
3.3		Zii Sode						
J. C	Name		Schedule D, line					
	TMITO		☐ Schedule E/F, line					
	Number Street		Schedule G, line					
	City State	ZIP Code						
	State	ZIP Code						
0.55								

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	Ad	ditional Page to L	ist More Codebtors		
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					□ Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	Number	Sileet			
	City		State	ZIP Code	-
3					— ☐ Schedule D, line
	Name				Schedule E/F, line
	Number	Stroot			Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3					
Н	Name				Schedule D, lineSchedule E/F, line
					Schedule E/F, line
	Number	Street			Solicadic O, iiilo
	City		State	ZIP Code	_
3					
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_
3	City		State	ZIP Code	
	Name				_ Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	Oth :		04-4-	710.0-4-	_
3	City		State	ZIP Code	
<u></u>]	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
					<u>_</u>
	City		State	ZIP Code	
3	Name				Schedule D, line
	Name				☐ Schedule E/F, line
	Number	Street			Schedule G, line
3	City		State	ZIP Code	
					□ Schedule D, line
	Name				Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	_

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Fill in this information to identify	your case:				
Debtor 1 Eric Brooks					
First Name	Middle Name	Last Name		-	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		-	
United States Bankruptcy Court for the: I	Eastern District of Pennsylva	nia			
Case number <u>24-10100</u>				Check if	this is:
(If known)				☐ An an	nended filing
					plement showing postpetition chapter 13 e as of the following date:
Official Form 106I				MM /	DD / YYYY
Schedule I: You	ır Income				12/15
supplying correct information. If yo	ou are married and not filir se is not filing with you, d top of any additional page	ig jointly, and you not include info	ur spo ormati	ouse is living with on about your spo	or 2), both are equally responsible for you, include information about your spouse. buse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job,		Debtor 1			Debtor 2 of Hori-Hilling Spouse
attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed	ed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.					
Occupation may include student or homemaker, if it applies.	Occupation				
	Employer's name				
	Employer's address				
		Number Street			Number Street
		City	State	ZIP Code	City State ZIP Code
	How long employed there	?			
Part 2: Give Details About	Monthly Income				
	•				
Estimate monthly income as of spouse unless you are separated.		. If you have nothi	ng to r	eport for any line, v	rite \$0 in the space. Include your non-filing
If you or your non-filing spouse ha below. If you need more space, at			rmatio	n for all employers	for that person on the lines
				For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	\$
3. Estimate and list monthly over	time pay.		3.	+\$	+ \$
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$	\$

Official Form 106l Schedule I: Your Income page 1

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Debtor 1

Eric Brooks

t Name	Middle Name	Last Na

Case number (*if known*) 24-10100

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$	\$
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$	\$
5b. Mandatory contributions for retirement plans	5b.	\$	_ _ \$
5c. Voluntary contributions for retirement plans	5c.	\$	
5d. Required repayments of retirement fund loans	5d.	\$	
5e. Insurance	5e.	\$	\$
5f. Domestic support obligations	5f.	\$	\$
5g. Union dues	5g.	\$	\$
5h. Other deductions. Specify:	5h.	+ \$	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	
8b. Interest and dividends	8b.	\$	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		Ψ	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$
8d. Unemployment compensation	8d.	\$	
8e. Social Security	8e.	\$1,726.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	_ \$
8g. Pension or retirement income	8g.	\$	\$
8h. Other monthly income. Specify:	Ū	+\$	-
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	_
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$1,726.00	+ \$
11. State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, friends or relatives.			oommates, and other
Do not include any amounts already included in lines 2-10 or amounts that are			enses listed in Schedule
Specify:			
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain			-
13. Do you expect an increase or decrease within the year after you file this No.	form'	?	
Yes. Explain:			
'			

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Fill in this information to identify y	our case:			
Debtor 1 Eric Brooks First Name	Middle Name Last Name	Check if this is:		
Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: E Case number (If known)	Middle Name Last Name Eastern District of Pennsylvania	☐ An amended fi ☐ A supplement expenses as o	showing postpof the following	petition chapter 13 date:
Official Forms 400 l				
Official Form 106J Schedule J: You	ır Fynansas			12/15
Be as complete and accurate as pos	ssible. If two married people are fili	ng together, both are equally respons . On the top of any additional pages, v		ng correct
Part 1: Describe Your House	sehold			
1. Is this a joint case? 1. Is this a joint case? 1. No. Go to line 2. 1. Yes. Does Debtor 2 live in a second property in a second p	eparate household? Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2. Do you have dependents?	✓ No	·	Danandantia	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	with you?
Do not state the dependents' names.				 No Yes No Yes No Yes No Yes No Yes Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes			
Part 2: Estimate Your Ongoir	ng Monthly Expenses			
		re using this form as a supplement in ental Schedule J, check the box at the	-	•
Include expenses paid for with non- such assistance and have included	-		Your expe	nses
4. The rental or home ownership examp rent for the ground or lot.	xpenses for your residence. Include	first mortgage payments and 4.	\$	
If not included in line 4:				450.00
4a. Real estate taxes		4a.	\$	150.00
4b. Property, homeowner's, or re		4b.	\$	35.00
4c. Home maintenance, repair, a		4c.	\$ ¢	

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Debtor 1

Eric Brooks

First Name Middle Name

Last Name

Case number (if known) 24-10100

			Your expenses
5. Additional mortgage payments for	or your residence, such as home equity loans	5.	\$
6. Utilities:			
6a. Electricity, heat, natural gas		6a.	\$150.00
6b. Water, sewer, garbage collec	tion	6b.	\$ 35.00
6c. Telephone, cell phone, Intern	et, satellite, and cable services	6c.	\$ 150.00
6d. Other. Specify:		6d.	\$
7. Food and housekeeping supplie	s	7.	\$400.00
8. Childcare and children's educat	on costs	8.	\$
9. Clothing, laundry, and dry clean	ing	9.	\$
Personal care products and serv		10.	\$ 56.00
Medical and dental expenses		11.	\$ 100.00
 Transportation. Include gas, mair Do not include car payments. 	tenance, bus or train fare.	12.	\$100.00
13. Entertainment, clubs, recreation	, newspapers, magazines, and books	13.	\$ 100.00
4. Charitable contributions and rel		14.	\$
15. Insurance.	from your pay or included in lines 4 or 20.		
15a. Life insurance		15a.	\$
15b. Health insurance		15b.	\$
15c. Vehicle insurance		15c.	\$
15d. Other insurance. Specify:		15d.	\$
	ted from your pay or included in lines 4 or 20.	16.	\$
7. Installment or lease payments:			
17a. Car payments for Vehicle 1		17a.	\$
17b. Car payments for Vehicle 2		17b.	\$
• •		17c.	\$
		17d.	\$
	tenance, and support that you did not report as deducte	ed from	
	,		\$
	oport others who do not live with you.	19.	\$
	t included in lines 4 or 5 of this form or on Schedule I: \	Your Income.	
20a. Mortgages on other property		20a.	\$
20b. Real estate taxes		20b.	\$
20c. Property, homeowner's, or re	nter's insurance	20c.	\$
20d. Maintenance, repair, and upk	eep expenses	20d.	\$
20e. Homeowner's association or		20e.	\$

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Debtor 1	Eric Brool First Name	Middle Name	Last Name		Case number (if known) 24	10100	
21. Ot r	ner. Specify:				21.	+\$	
22. Cal	culate your mon	thly expenses.					
22a	a. Add lines 4 throu	ugh 21.			22a.	\$	1,326.00
22b	o. Copy line 22 (mo	onthly expenses	for Debtor 2), if any, from	m Official Form 106J-2	22b.	\$	
220	. Add line 22a and	d 22b. The result	is your monthly expens	es.	22c.	\$	1,326.00
23. Calc	ulate your month	nly net income.					4 700 00
23a.	Copy line 12 (yo	our combined mo	onthly income) from Sch	edule I.	23a.	\$	1,726.00
23b.	Copy your mont	hly expenses fro	om line 22c above.		23b.	- \$	1,326.00
23c.	Subtract your m	onthly expenses	from your monthly inco	me.			400.00
	The result is you	ur monthly net in	come.		23c.	\$	400.00
For	example, do you e	expect to finish p	aying for your car loan v	within the year after you within the year or do you e fication to the terms of you	expect your		
y v		ere.					
	схрын п	сı с.					

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Fill in this information to identify your case:				
Debtor 1	Eric Brooks			
-	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court for	the: Eastern District of Pe	ennsylvania	
	<u>24-10100</u>			
(If known)				

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
	s NOT an attorney to help you fill out bankruptcy forms?
☑ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
	ve read the summary and schedules filed with this declaration and
that they are true and correct.	
✗ /s/ Eric Brooks	×
Signature of Debtor 1	Signature of Debtor 2
00/40/0004	
Date 02/12/2024 MM / DD / YYYY	Date MM / DD / YYYY
	35 /